FE7AN014

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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FEC MAIL CENTER

	<u></u>	** * * ***		7 3 3 7	Office Use C	nly
1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If over the line	typing, type es.	12FE4M5	
P	Knaness d	Dr Nati	ve Ameri	dan I	ndians, B	lacks
ADDRESS (number and street) [13] West 35th Street						
ADDRESS (number and street)						
	Check if different than previously reported. (ACC)	New yor	12		W 1000	<u> </u>
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲						
COO523134 3. IS THIS NEW (N) OR (A) (A)						
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov. 20. (M11) (Non-Election Year Only)
٠	(a) Quarterly Reports:	SP - New got	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report	(Q1) (c) 12-Day	Apr 20 (M4) Primary	Jul 20 (M7)	Oct 20 (M10) i.	Jan 31 (YE) Runoff (12R)
	July 15 Quarterly Report October 15 Quarterly Report	Report fo	· ·	tion (12C)	Special (12S).	The state of the s
	January 31 Year-End Report		Election on	(0 0 /		the ate of
	July 31 Mid-Year Report (Non-elect Year Only) (MY)			I (30G)	Runoff (30R)	Special (30S)
	Termination Repo		Election on	1 89 1	. \	the ate of
5. Covering Period 18 64 2014 through 11 20 14						
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.						
Type or Print Name of Treasurer J. Barley Morgan						
Signature of Treasurer						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.						
L	Office Use	**************************************	The second secon	er en		ORM 3X 12/2004